L04000005091

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
,			
Certified Copies Certificates of Status			
00141104 001100			
Special Instructions to Filing Officer:			

Office Use Only



100025643581

01/14/04--01044--008 **125.00



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: BOB'S PAINTING + MARBLE PINISHING LLC

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT L. OBENAUER

(Name of Person)

ROTI'S PAINTING - MARBLE FINISHME LLC

(Firm/Company)

H451 DEER RIDGE PLACE

(Address)

SARASOTA, FL 34233

(City/State and Zip Code)

For further information concerning this matter, please call:

HENRY W MOTT at (941) 337-7668

(Nakne of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 **MAILING ADDRESS:**

AND AND STATE OF THE STATE OF T

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	F	ORGANIZATION OR LIABILITY COMPANY A STATE FAMILIE HAVE LACE A STATE FAMILIE HAVE A STATE FAMILIE HAVE LACE A STATE FAMILIE HA
ARTICLE I - N	lame: Limited Liability Company is:	
Bor's	PAINTING - MAR	BLE FINISHING LLC
ARTICLE II - A		rincipal office of the Limited Liability Company is:
Principal Office	: Address:	Mailing Address:
1451 DE	ER RIDGE PLACE	4451 DEKR RIDGE PLACE
ATOCASTAC	1. FL 34/233	SARASOTA, FL 34233
ADTICLE III	Decistand Agent Decistand	l Office, & Registered Agent's Signature:
	e Florida street address of the r	
	Henry W. Mott	
	Name	
	425 Poincianna Dr Florida street address (P.O.	D. Box NOT acceptable)
	Sarasota	FI ORINA 34243

FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

City, State, and Zip

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member

MGRM	ROBERT L. OBENAUER
	4451 DEER RIDGE PLACE
	SARASOTA, FC 34233
	The substitute of the property of the second
	ي د په خوان د د کوان مسامل په و د د
(Use attachment if necessary)	

TOWN AND THE SECONDARY SE

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

that the facts stated herein are true.)

ROBERT L. OBENALER
Typed or printed name of signee

Filing Fees:

✓\$100.00 Filing Fee for Articles of Organization

√\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

70 7141510N of Corporations